IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Fra

Franco Vallana et al.

Attorney Docket: SBC1025USC1

Serial No.:

10/790,649

Group Art Unit: 3731

Filed:

March 1, 2004

Examiner: Suzette Jaime J. Gherbi

For:

ANGIOPLASTY STENTS

AMENDMENT TRANSMITTAL

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith are a Supplemental Amendment and Response (7 pages), and a Notice of Appeal from the Examiner to the Board of Patent Appeals and Interferences (2 pages).

[] The fee for a _____-month extension of time is enclosed.

[X] No additional claim fee is required.

The fee has been calculated as shown below:

| | | | | | Small Entity | | Other than a Small Entity | |
|--|---|-------|---|----------------------------|--------------|------------------------|---------------------------|------------------------|
| | Claims remaining after amendment | | Highest number previously paid for | Extra Claims Present | Rate | Addit. Claim Fee | Rate | Addit. Claim Fee |
| Total | 15 | Minus | 31 | 0 | x 25 | | x 50 | 0 |
| Independent | 1 | Minus | 4 | 0 | x 100 | | x 200 | 0 |
| First presentation of multiple dependent claim | | | | | x 180 | | x 360 | 0 |
| | | | | | Total | | Total | \$0 |

Certificate of Express Mailing (37 C.F.R. § 1.10)

I hereby certify that this paper or fee is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" Mailing Label No. <u>EV 857722824 US</u> in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

Date: May 15, 2006

Signature:

Name: Jodi Jung

Amendment Transmittal

Applicants: Franco Vallana et al.

Serial Number: 10/790,649

Attorney Docket: SBC1025USC1

- Please charge Deposit Account No. 16-2312 in the amount of \$_____ to cover the fee for a Notice of Appeal.
- [X] A check in the amount of \$500.00 is enclosed to cover the fee for a Notice of Appeal.
- [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2312.
 - [X] Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims.
 - [X] Any patent application processing fees under 37 C.F.R. § 1.17.

Respectfully submitted,

Date:

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N THE UNITED STATES PATENT AND TRADEMARK OFFICE

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For: ANGIOPLASTY STENTS

SUPPLEMENTAL AMENDMENT AND RESPONSE TO FINAL OFFICE ACTION

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed April 28, 2006, please amend the application and enter the remarks as follows.

Certificate of Express Mailing (37 C.F.R. § 1.10)

I hereby certify that this paper or fee is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" Mailing Label No. <u>EV 857722824 US</u> in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

Date: May 15, 2006

Signature:

Name: Jodi/Jung